

# FACSIMILE COVER SHEET

March 19, 2007

Receiver:

Central Fax Number/Examiner Michael H. Thaler

**USPTO** 

TEL#:

FAX #:

571-273-8300

Sender:

Mary Terry, Patent Secretary for Dean E. Wolf

Our Ref. No.: MSKTP001

Your Ref:

10/644,601

Re:

Response to Restriction Requirement

Pages Including Cover Sheet(s): 4

#### **FAX CONTENTS:**

Fax Cover Sheet - 1 page Response to Restriction Requirement - 2 pages Amendment Transmittal - 1 page

#### **MESSAGE:**

### CONFIDENTIALITY NOTE

The information contained in this facsimile (FAX) message is legally privileged and confidential information intended only for the use of the receiver or firm named above. If the reader of this message is not the intended receiver, you are hereby notified that any dissemination, distribution or copying of this FAX is strictly prohibited. If you have received this FAX in error, please immediately notify the sender at the telephone number provided below and return the original message to the sender at the address below via the United States Postal Service. Thank you.

RECEIVED CENTRAL FAX CENTER

NO. 476 --- P. 2--

MAR 1 9 2007

# IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Masket

Attorney Docket No.: MSKTP001

Application No.: 10/644,601

Examiner: Michael H. Thaler

Filed: August 20, 2003

Group: 3731

Title: METHOD AND APPARATUS FOR PERFORMING AN ACCURATELY SIZED AND PLACED ANTERIOR CAPSULORHEXIS

> CERTIFICATE OF FACSIMILE TRANSMISSION: I hereby certify that this correspondence is being transmitted by facsimile to the United States Patent and Trademark Office,

Commissioner for Patents, Attn: Examiner Thaler, Fax No. (571) 273-8300, Alexandria, VA 22313-1450 on: March 19, 2007

## AMENDMENT TRANSMITTAL

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

 $\boxtimes$ 

Transmitted herewith is an Amendment in the above-identified application.

The fee has been calculated as shown below.

	Claims After Amendment		Highest Previously Paid For	Present Extra	Small Entity Rate Fee	Large Entity Rate Fee
Total Claims	18	MINUS	20	00	x 25 =	x 50 =
Independent Claims	3	MINUS	3	00	x 100 =	x 200 =
Multiple Depe	ndent Claim Pro	sent and Fe	e Not Previous	ly Paid		
			, <del></del>	Total	\$	\$0

冈 Applicant(s) believe that no (additional) Extension of Time is required; however, if it is determined that such an extension is required, Applicant(s) hereby petition that such an extension be granted and authorize the Commissioner to charge the required fees for an Extension of Time under 37 CFR 1.136 to Deposit Account No. 500388.

Enclosed is our Check No.

in the amount of \$

to cover the additional

claim fee and/or extension of time fees.

Please charge the required fees, or any additional fees required to facilitate filing the enclosed response, to Deposit Account No. 500388 (Order No. MSKTP001).

> Respectfully submitted, BEYER-WEAVER LLP

Dean E. Wolf Reg. No. 37

P.O. Box 70250 Oakland, CA 94612-0250

NO. 476

P. 3

MAR 1 9,2007

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Masket

Attorney Docket No.: MSKTP001

Application No.: 10/644,601

Examiner: Michael H. Thaler

Filed: August 20, 2003

Group: 3731

Title: METHOD AND APPARATUS FOR PERFORMING AN ACCURATELY SIZED

AND PLACED ANTERIOR

**CAPSULORHEXIS** 

CERTIFICATE OF FACSIMILE TRANSMISSION:

I hereby certify that this correspondence is being transmitted by facsimile to the United States Patent and Trademark Office, Commissioner for Patents, Attn: Examiner Thaler, Fax No. (571) 273-8300, Alexandria, VA 22313-1450 on: March 19, 2007 Signed:

RESPONSE TO RESTRICTION REQUIREMENT

Mail Stop Amendments Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

In response to the Office Action dated March 2, 2007, please amend the above-identified patent application as follows:

Remarks/Arguments begin on page 2 of this paper.